
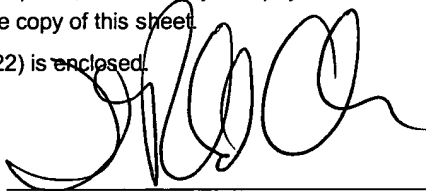


NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 0378-0386P	
	In re Application of Akiko KUWAYAMA		
	Application Number 10/084,181-Conf. #004914	Filed February 28, 2002	
	For DIGITAL CAMERA WITH A PERSONAL IDENTIFICATION		
	Art Unit 2615	Examiner A. J. Daniels	
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>500.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2448</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 20px;"> <div style="width: 45%;"> <p>I am the</p> <p><input type="checkbox"/> applicant /inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input type="checkbox"/> attorney or agent of record. Registration number _____</p> <p><input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. <u>40,439</u></p> </div> <div style="width: 50%; text-align: center;">  <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Signature <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> D. Richard Anderson Typed or printed name <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> (703) 205-8000 Telephone number <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> June 26, 2006 Date </div> </div>			

☐ *Total of 1 forms are submitted.

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